rates.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FILED

FORM (RF-3)

SUMMARY SHEET

OCT 1 3 2010

STATE OF ILLINOIS Change in Company's premium or rate level produced by DEPARTMENTOF INSURANCE SPRINGFIELD, ILLINOIS effective October 13, 2010 (1) (2) (3)**Annual Premium** Percent Volume (Illinois) * Change (+or-) ** Coverage Automobile Liability Private 1. Passenger Commercial 2 Automobile Physical Damag Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. **Fidelity** 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Workers Compensation \$831,668 +9.9% Life of Insurance Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt NCCI's 01/01/10 loss costs and revise loss cost multipliers *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new

Meridian Security Insurance Company

Name of Company

Ben Mego, State Regulatory Analyst I

Official - Title

FORM (RF-3) SUMMARY SHEET

	revision effective	July 15, 2010 (2)	(3)
	(1)	(2) Annual Premium	Percent
	Coverage_	Volume (Illinois) *	Change (+ or -)
	Automobile Liebility		
	Automobile Liability Private Passenger		
	Commercial		
	Automobile Physical Damage		
	Private Passenger Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Workers Compensation	\$3,403,106	-7.0%
	Line of Insurance		
Do	pes filing only apply to certain territory (territ	tories) or certain	
cla	asses? If so, specify: No		
	w		
	ief description of filing. (If filing follows rate		0
org		e the upward deviations for Artisan	Contractor
	and Aut	tomotive classes.	

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

JUL 1 5 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
OPIGNOFIELD, ILLINOIS

Mid-Century Insurance Company

Name of Company

game of Balhart

James J. Gebhard, FCAS, MAAA Actuary, Workers Compensation

Section 754.EXHIBIT A Summary Sheet (Form RF-3)



FORM (RF-3)

OCT 1 3 2010

SUMMARY SHEET

DEPARTMENT OF ILLINOIS
SPRINGS INSURANCE

Change in Company's premium or rate level produced by rate revisions.

effective October 13, 2010 (1) (2) (3)Annual Premium Percent Coverage Volume (Illinois) * Change (+or-) ** **Automobile Liability Private** Passenger Commercial 2 Automobile Physical Damag Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. **Fidelity** 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Workers Compensation \$4,437877 +6.2% Life of Insurance Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt NCCI's 01/01/10 loss costs and revise loss cost multipliers *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. State Automobile Mutual Insurance Company Name of Company

Ben Mego, State Regulatory Analyst I

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revisior PCT 1 3 2010 effective October 13, 2010 STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS (1)(2) **Annual Premium** Percent Coverage Volume (Illinois) * Change (+or-) ** Automobile Liability Private 1. Passenger Commercial 2 Automobile Physical Damag Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. **Fidelity** 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Workers Compensation \$1,213,059 +2.5% Life of Insurance Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt NCCI's 01/01/10 loss costs and revise loss cost multipliers *Adjusted to reflect all prior rate changes.

State Auto Property and Casualty Insurance Company Name of Company Ben Mego, State Regulatory Analyst I Official - Title

^{**}Change in Company's premium level which will result from application of new rates.

RECEIVED

JUL - 7 2010

Form (RF-3)

STATE OF ILLINOIS SUMMARY SHEET DEPARTMENT OF INSURANCE SPRINGFIELD

	Change in Company's premium or rate level produced by rate revision effective		September 1, 2010	
	C	(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.		obile Liability		
	Private	e Passenger		
2.		nerciai obile Physical Damage		
۷.		e Passenger		
	Comm			
3.		y Other Than Auto		
4.		y and Theft		
5.	Glass	•		
6.	Fidelity	,		
7.	Surety			
8.		and Machinery		
9.	Fire			
10.		ed Coverage		
11.	Inland I			
12. 13.	Homeo	wners ercial Multi-Peril		
13.	Crop H			
15.	Other	Workers' Compensation	17,621,461	+5.8
13.		Line of Insurance	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		apply to certain territory (ter pecific class codes - see attac	ritories) or certain classes? If so, specify:	
Brief Ove	description	n of filing. (If filing follows in level change of + 5.8. Fili	rates of an advisory organization, specify or ing a deviation of 1.208 from the NCCI ra	organization): tes for Westfield Insurance
#22	8-24112. A	Iso filing deviations to specif	fic class codes; Tier II - 1.00, Tier III .90 (-	-10%), Tier IV .80 (-20%), all
		es 1.208 (+20).		

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

SEP 0 1 2010

Westfield Insurance Co.

Name of Company

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Rhonda Roberts, CIC
Line of Business Specialist
Commercial Underwriting Office
Official - Title

ILLINOIS SUMMARY SHEET FORM RF-3

Change in company's premium or rate level p	7/1/2010		
(1)	(2) Annual Premium	(3) Percent	
Coverage	Volume (Illinois)*	Change (+ or -)**	
Automobile Liability Private Passenger Commercial			
Automobile Physical Damage Private Passenger Commercial			
3. Liability Other than Auto			
4. Burglary and The			
5. Glass 2010	5 JOE		
4. Burglary and The 2010 5. Glass 6. Fidelity	UKAT UKAT		
7. Surety 8. Boiler and Machinery STATE OF OF THE	URAN.		
8. Boiler and Machinery STANEGELLE			
9. Fire DEP^{RISPRIT}			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Workers' Compensation	10,981,822	-6.9%	
16. Other			
Line of Insurance Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify	No	
Brief description of filing (if filing follows rates We are filing to revise our selected devite	of an advisory organization, specify organizations by class.	ganization)	
 * Adjusted to reflect all prior rate changes. ** Change in company's premium level which 	ch will result from application of new rat	es.	
		Zenith Insurance Compar	ıy
		Name of Company	

Jason Clarke, Senior Vice President & Actuary
Official - Title